## **COMSEC AIDS ITEMS REGISTER** (Using Unit) For use of this form, see TB 380-41; the proponent agency is CSLA. 1. SHORT TITLE 3. LOCATION 4. ALC 5. ACCOUNT NO. 2. NSN/MCN SERIAL DEST/ **RECEIPT** DISPOSITION DESTRUCTION CERTIFICATION NUMBERS EDIT/ ISSUE REG **SERIAL SERIAL** DATE DATE DATE **BEGIN FROM** TO END 1. CUSTODIAN 2. WITNESS (YYYYMMDD) (YYYYMMDD) NUMBER NUMBER (YYYYMMDD) 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2.

**DA FORM 2011, MAR 2006** 

THIS FORM, TOGETHER WITH DA FORM 2011-1, MAR 06 REPLACES DA FORM 2011-1, NOV 77, WHICH IS OBSOLETE.

APD LC v1.00